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RESPONSE UNDER 37 CFR 1.116
EXPEDITED PROCEDURE
EXAMINING GROUP: 1771

May 25, 2004

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re\ Application of: Cynthia M. Ciliberto, Kenneth M. Feld
and Donna M. Heren

Appln. No.: 09/890,484 Examiner: D. Handy
Filed: December 31, 2001 Group Art Unit: 1743
For: DISSOLUTION TEST SAMPLE HOLDER
(Atty. Docket No. 22788-A USA)

CERTIFICATE OF MAILING

I hereby certify that this correspondence is being deposited with the United States Postal Service as first-class mail, postage prepaid, in an envelope addressed to: Commissioner for Patents, Mail Stop AF, P. O. Box 1450, Alexandria, VA 22313-1450 on May 25, 2004.


Dawn M. Larsen

REPLY TO THE FINAL OFFICE ACTION
DATED APRIL 7, 2004
PURSUANT TO 37 CFR §1.116

Commissioner for Patents
Mail Stop AF
P. O. Box 1450
Alexandria, VA 22313-1450

Sir:

In response to the final Office Action dated April 7, 2004, please amend the application as follows.

SYNNESTVEDT & LECHNER LLP

Reply to the Final Office Action
Dated April 7, 2004

Appln. No. 09/890,484

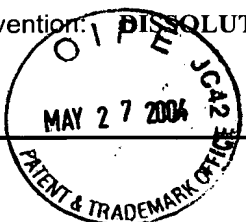

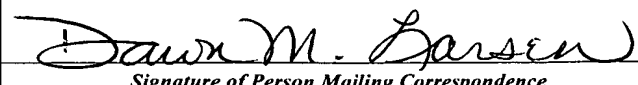
- 2 -

May 25, 2004

Amendments to the Claims begin on page 3 of this paper.

Remarks begin on page 8 of this paper.

IFW AP TAB

AMENDMENT TRANSMITTAL LETTER (Large Entity)				Docket No. 22788-A USA	
Applicant(s): Ciliberto et al					
Serial No. 09/890,484	Filing Date Dec. 31, 2001	Examiner D. Handy		Group Art Unit 1743	
Invention: DISSOLUTION TEST SAMPLE HOLDER					
 TO THE COMMISSIONER FOR PATENTS:					
Transmitted herewith is an amendment in the above-identified application.					
The fee has been calculated and is transmitted as shown below.					
CLAIMS AS AMENDED					
	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST # PREV. PAID FOR	NUMBER EXTRA CLAIMS PRESENT	RATE	ADDITIONAL FEE
TOTAL CLAIMS	17 -	20 =	0 x	\$18.00	\$0.00
INDEP. CLAIMS	3 -	4 =	0 x	\$86.00	\$0.00
Multiple Dependent Claims (check if applicable) <input type="checkbox"/>					\$0.00
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT					\$0.00
<input checked="" type="checkbox"/> No additional fee is required for amendment. <input type="checkbox"/> Please charge Deposit Account No. _____ in the amount of _____ <input type="checkbox"/> A check in the amount of _____ to cover the filing fee is enclosed. <input type="checkbox"/> The Director is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account No. _____ <input type="checkbox"/> Any additional filing fees required under 37 C.F.R. 1.16. <input type="checkbox"/> Any patent application processing fees under 37 CFR 1.17.					
 _____ <i>Signature</i> John A. Chionchio, Reg. No. 40,954 Synnestvedt & Lechner LLP 1101 Market Street, Suite 2600 Philadelphia, PA 19107-2950 Telephone: 215-923-4466 Facsimile: 215-923-2189			Dated: May 25, 2004		
CC:			I certify that this document and fee is being deposited on May 25, 2004 with the U.S. Postal Service as first class mail under 37C.F.R. 1.8 and is addressed to the for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.  <i>Signature of Person Mailing Correspondence</i> Dawn M. Larsen <i>Typed or Printed Name of Person Mailing Correspondence</i>		